

CLAIMS ONLY

SERIAL NO. _____ FILING DATE _____

APPLICANT(S) _____

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1						
2						
3						
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25						
26						
27						
28	1					
29		1				
30		1				
31		1				
32		1				
33		1				
34		1				
35		1				
36		1				
37		1				
38	1					
39		1				
40		1				
41		1				
42	1					
43		1				
44		1				
45		1				
46						
47						
48						
49						
50						
TOTAL IND.	3		1		1	
TOTAL DEP.	15		15		15	
TOTAL CLAIMS	18		18		18	

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	IND.	DEP.	IND.	DEP.	IND.	DEP.
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97						
98						
99						
100						
TOTAL IND.			1		1	
TOTAL DEP.			15		15	
TOTAL CLAIMS			18		18	

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS